Millwrights Machine Erectors & Maintenance Union Local 1021 Group Retirement Savings Plan

Electronic Deposit of GRSP Benefit Payments

I,	, S.I.N being a			
permit or reciprocal member (or a memb		ood standing over ag		he Millwrights Union Local
1021, authorize and direct you to have r				
account described below. I understand, I	can ch	ange this authorizat	ion by sen	ding a written notice to the
fund office.				
Please deposit my GRSP benefit paymen	t to:			
Name of Institution				
Address (Street)				
			п	
City			Province	Postal Code
Name(s) of Account Holder(s)				
Account No.		Bank No.		Bank Transit No.
* You MUST attach a VOIDED chequ	ue if fu	ands are to be depos	sited into :	a chequing account.
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If you require assistance providing the re-	quired i	information with res	spect to you	ur bank account, please
contact your financial institution.	1	-	Ι .	
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Date		Constura of N	Tambar	
Date	Signature of M	/lember		
	_			
Name of Witness (Please Print)		Signature of W	Vitness	
		1 O War of Oracin		
		t Consulting Group 08 St NW		
,				
	Edmonton AB T5J 1L3			
Phone: (780) 452-5161 Toll Free: 1-800-770-2998				